


MINERALS MANAGEMENT SERVICE
SUNDRY NOTICES AND REPORTS ON WELL

Submit original plus three copies with
one copy marked "Public Information"

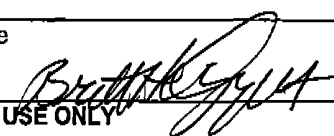
OMB No. 1010-0045
Expiration Date: August 31, 1996

1. Original Correction <input checked="" type="checkbox"/>		2. API Well Number/Producing Interval Code 17-701-40320-00		3. Well No. 003		11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604																					
8. Field Name WILDCAT		9. Unit Number NA		10. MMS Operator Number 00560																							
WELL AT TOTAL DEPTH																											
4. Lease Number G4090		5. Area Name WEST CAMERON		6. Block Number 294		7. OPD Number LA1A																					
32. Type of Submittal Request Approval <input checked="" type="checkbox"/> Subsequent Report <input checked="" type="checkbox"/>		33. Proposed or Completed Work <table border="0"> <tr> <td>Acidize <input type="checkbox"/></td> <td>Fracture <input type="checkbox"/></td> <td>Plug Back <input type="checkbox"/></td> <td>Work Over <input type="checkbox"/></td> </tr> <tr> <td>Alter Casing <input type="checkbox"/></td> <td>Initial Completion <input type="checkbox"/></td> <td>Pull Casing <input type="checkbox"/></td> <td>Other <input checked="" type="checkbox"/></td> </tr> <tr> <td>Artificial Lift <input type="checkbox"/></td> <td>Multi-Completion <input type="checkbox"/></td> <td>Recompletion <input type="checkbox"/></td> <td>RIG POSITION & LOCATION PLAT <input type="checkbox"/></td> </tr> <tr> <td>Change Zone <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> <td>Sidetrack <input type="checkbox"/></td> <td>Isolation District <input type="checkbox"/></td> </tr> <tr> <td>Deepen <input type="checkbox"/></td> <td>Perm Abandonment <input type="checkbox"/></td> <td>Temp Abandonment <input type="checkbox"/></td> <td></td> </tr> </table>					Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>	Alter Casing <input type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>	RIG POSITION & LOCATION PLAT <input type="checkbox"/>	Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>	Isolation District <input type="checkbox"/>	Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>		34. Well Status/ Type Code DRL
Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>																								
Alter Casing <input type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input checked="" type="checkbox"/>																								
Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>	RIG POSITION & LOCATION PLAT <input type="checkbox"/>																								
Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>	Isolation District <input type="checkbox"/>																								
Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>																									
WELL AT SURFACE																											
12. Well Location At Surface (Surveyed) N6301E01597		13. Lease Number G4090		14. Area Name WEST CAMERON		15. Block Number 294																					
16. OPD Number LA1A		35. Survey Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>		18. Water Depth (Surveyed) 44'		19. Elevation At KB (Surveyed) 100'																					
20. Rig Name ENSOCO 55		21. Rig Type JU		36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate)																							
26. Contact Name ALLISON J. BROWN				27. Telephone Number 713.654.2651																							
28. Authorizing Official (Type Name) STEVE CONLEY				29. Title ENGINEERING SUPERVISOR, DRILLING																							
30. Authorizing Signature 				31. Date 001005																							
THIS SPACE FOR MMS USE ONLY Approved By (Orig. Sgd.) Larry D. Williamson				Title District Supervisor Lake Charles																							
				Date 10/12/00																							
<p>PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that this information is being collected to obtain knowledge of equipment and procedures to be used during well-completion, workover, and production operations. This information will be used by the District Supervisor to evaluate and approve or disapprove the adequacy of the equipment and procedures to safely perform the proposed operations. Response to this request is mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.18.</p> <p>Public reporting burden for this form is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 2053, Minerals Management Service, 381 Elden Street, Herndon, VA 22070-4817; and Office of Management and Budget, Paperwork Reduction Project (OMB No. 1010-0045), Washington, DC 20503.</p>																											

FORM MMS-124 (August 1993) (Replaces Form MMS-331 and MMS-332 which will not be used)

PUBLIC INFORMATION

SUNDRY NOTICES AND REPORTS ON WELL

1. Original <input checked="" type="checkbox"/> Correction <input type="checkbox"/>		2. API Well Number/Producing Interval Code 17-701-40320-00-X01		3. Well No. 003 (WB00)		11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP. 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604																					
8. Field Name WILDCAT		9. Unit Number NA		10. MMS Operator Number 00560																							
WELL AT TOTAL DEPTH																											
4. Lease Number G 4090		5. Area Name WEST CAMERON		6. Block Number 294		7. OPD Number LA1A																					
32. Type of Submittal Request Approval <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/>		33. Proposed or Completed Work <table style="width:100%;"> <tr> <td>Acidize <input type="checkbox"/></td> <td>Fracture <input type="checkbox"/></td> <td>Plug Back <input type="checkbox"/></td> <td>Work Over <input type="checkbox"/></td> </tr> <tr> <td>Alter Casing <input type="checkbox"/></td> <td>Initial Completion <input checked="" type="checkbox"/></td> <td>Pull Casing <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Artificial Lift <input type="checkbox"/></td> <td>Multi-Completion <input type="checkbox"/></td> <td>Recompletion <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Change Zone <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> <td>Sidetrack <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Deepen <input type="checkbox"/></td> <td>Perm Abandonment <input type="checkbox"/></td> <td>Temp Abandonment <input type="checkbox"/></td> <td></td> </tr> </table>					Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>	Alter Casing <input type="checkbox"/>	Initial Completion <input checked="" type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>	Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>		Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>		Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>		34. Well Status/ Type Code DRL
Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>																								
Alter Casing <input type="checkbox"/>	Initial Completion <input checked="" type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>																								
Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>																									
Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>																									
Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>																									
WELL AT SURFACE																											
12. Well Location At Surface (Surveyed) N06301E01597		13. Lease Number G 4090		14. Area Name WC		15. Block Number 294																					
16. OPD Number LA1A		35. Survey-Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>		18. Water Depth (Surveyed) 43'		19. Elevation At KB (Surveyed) 101'																					
20. Rig Name ENSCO 55		21. Rig Type JU		36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate)																							
26. Contact Name ALLISON J. BROWN				27. Telephone Number 713.654.2651																							
28. Authorizing Official (Type Name) BRETT LIGGETT				29. Title SENIOR OPERATIONS ENGINEER																							
30. Authorizing Signature 				31. Date 01/10/01																							
THIS SPACE FOR MMS USE ONLY																											
Approved By (Orig. Sgd.) Larry D. Williamson				Title																							
				Date 01/10/01																							
<p>PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.</p>																											

**MINERALS MANAGEMENT SERVICE
APPLICATION FOR PERMIT TO DRILL (APD)**

Submit original plus two copies with
one copy marked "Public Information"

OMB No. 1010-0044
Expiration Date: August 31, 1996

1. Original Correction <input checked="" type="checkbox"/>	2. API Well Number	3. Well No. 003	11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP. 1201 LOUISIANA, SUITE 400 HOUSTON, TX 77002-5604	
8. Field Name WILDCAT	9. Unit Number NA	10. MMS Operator Number 00560		
WELL AT TOTAL DEPTH				
17. Well Location At Total Depth (Estimated) N06300E01600	4. Lease Number G4090	5. Area Name WC	6. Block Number 294	7. OPD Number LA1A
WELL AT SURFACE				
12. Well Location At Surface (Estimated) N06300E01600	13. Lease Number G4090	14. Area Name WC	15. Block Number 294	16. OPD Number LA1A
18. Water Depth (Estimated) 44'	19. Elevation At KB (Estimated) 100'	20. Rig Name ENSCO 55		21. Rig Type JU
22. Type of Well: Exploratory <input checked="" type="checkbox"/> Development <input type="checkbox"/>	23. Spud Date (Proposed) 000910	24. Total Depth (Proposed) MD _____ TVD _____		

25. Attachments (Attach complete well prognosis and attachments required under 30 CFR 250.64(b) through (g) or 30 CFR 272(c) and (d), as appropriate)

26. Contact Name ALLISON J. BECVAR	27. Telephone Number 713.654.2651
28. Authorizing Official (Type Name) STEVE CONLEY	29. Title ENGINEERING SUPERVISOR, DRILLING
30. Authorizing Signature <i>[Signature]</i>	31. Date 000830

THIS SPACE FOR MMS USE ONLY

Approved (With Attached Conditions ☒) By _____ Title _____
 (Without Conditions ☐) *[Signature]* Larry D. Williamson Date 9/7/00

API Well No. Assigned To This Well 17-701-40320-00

PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1980 (44 U.S.C. 3501 et seq.) requires us to inform you that this information is being collected to obtain knowledge of equipment and procedures to be used in drilling operations. This information will be used by MMS District Supervisors to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operation. Response to this request is mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.18.

Public reporting burden for this form is estimated to average 1½ hour per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 2053, Minerals Management Service, 381 Elden Street, Herndon, VA 22070-4817; and Office of Management and Budget, Paperwork Reduction Project (OMB No. 1010-0044), Washington, DC 20503.

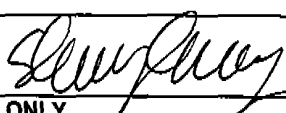
FORM MMS-123 (August 1993) (Replaces Form MMS-331C which will not be used)

PUBLIC INFORMATION

SUNDRY NOTICES AND REPORTS ON WELL

1. Original <input checked="" type="checkbox"/> Correction <input type="checkbox"/>		2. API Well Number/Producing Interval Code 17-701-40320-00-S01		3. Well No. 003 ST00BP00		11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604																					
8. Field Name WILDCAT		9. Unit Number NA		10. MMS Operator Number 00560																							
WELL AT TOTAL DEPTH																											
4. Lease Number G 4090		5. Area Name WEST CAMERON		6. Block Number 294		7. OPD Number LA1A																					
32. Type of Submittal Request Approval <input checked="" type="checkbox"/> Subsequent Report <input checked="" type="checkbox"/>		33. Proposed or Completed Work <table style="width:100%;"> <tr> <td>Acidize <input type="checkbox"/></td> <td>Fracture <input type="checkbox"/></td> <td>Plug Back <input type="checkbox"/></td> <td>Work Over <input type="checkbox"/></td> </tr> <tr> <td>Alter Casing <input type="checkbox"/></td> <td>Initial Completion <input type="checkbox"/></td> <td>Pull Casing <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Artificial Lift <input type="checkbox"/></td> <td>Multi-Completion <input type="checkbox"/></td> <td>Recompletion <input type="checkbox"/></td> <td>RENAME WELL <input type="checkbox"/></td> </tr> <tr> <td>Change Zone <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> <td>Sidetrack <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Deepen <input type="checkbox"/></td> <td>Perm Abandonment <input type="checkbox"/></td> <td>Temp Abandonment <input type="checkbox"/></td> <td></td> </tr> </table>					Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>	Alter Casing <input type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>	Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>	RENAME WELL <input type="checkbox"/>	Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>		Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>		34. Well Status/ Type Code COM/GSI
Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>																								
Alter Casing <input type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>																								
Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>	RENAME WELL <input type="checkbox"/>																								
Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>																									
Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>																									
WELL AT SURFACE																											
12. Well Location At Surface (Surveyed) N06301E01597		13. Lease Number G4090	14. Area Name WC	15. Block Number 294		16. OPD Number LA1A																					
35. Survey Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>		18. Water Depth (Surveyed) 43'	19. Elevation At KB (Surveyed) 101'		20. Rig Name NA		21. Rig Type NA																				
36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate) <div style="border: 2px solid black; padding: 10px; text-align: center; margin: 10px auto; width: fit-content;"> <p>Received MMS GOM OCS</p> <p>APR 16 2001</p> <p>Public Information Unit</p> </div>																											
26. Contact Name ALLISON J. BROWN				27. Telephone Number 713.654.2651																							
28. Authorizing Official (Type Name) BRADLEY ELLIOTT				29. Title PETROLEUM ENGINEER																							
30. Authorizing Signature <i>Bradley Elliott</i>				31. Date 010402 <i>Teddy J. Harrington</i> District Supervisor Lake Charles District																							
THIS SPACE FOR MMS USE ONLY																											
Approved By <u>(Orig. Sgd.) Guy A. Thibodeaux</u>				Title _____																							
				Date <u>4-9-01</u>																							
<p>PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.</p>																											

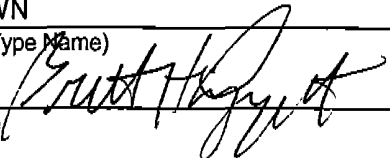
SUNDRY NOTICES AND REPORTS ON WELL

1. Original Correction <input checked="" type="checkbox"/>	2. API Well Number/Producing Interval Code 17-701-40320-00-X01	3. Well No. 003	11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604																				
8. Field Name WILDCAT	9. Unit Number NA	10. MMS Operator Number 00560																					
WELL AT TOTAL DEPTH																							
4. Lease Number G 4090	5. Area Name WEST CAMERON	6. Block Number 294	7. OPD Number LA1A																				
32. Type of Submittal Request Approval <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/>	33. Proposed or Completed Work <table style="width:100%;"> <tr> <td>Acidize <input type="checkbox"/></td> <td>Fracture <input type="checkbox"/></td> <td>Plug Back <input type="checkbox"/></td> <td>Work Over <input type="checkbox"/></td> </tr> <tr> <td>Alter Casing <input checked="" type="checkbox"/></td> <td>Initial Completion <input type="checkbox"/></td> <td>Pull Casing <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Artificial Lift <input type="checkbox"/></td> <td>Multi-Completion <input type="checkbox"/></td> <td>Recompletion <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Change Zone <input type="checkbox"/></td> <td>Perforate <input type="checkbox"/></td> <td>Sidetrack <input type="checkbox"/></td> <td></td> </tr> <tr> <td>Deepen <input type="checkbox"/></td> <td>Perm Abandonment <input type="checkbox"/></td> <td>Temp Abandonment <input type="checkbox"/></td> <td></td> </tr> </table>		Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>	Alter Casing <input checked="" type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>	Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>		Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>		Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>		34. Well Status/ Type Code DRL
Acidize <input type="checkbox"/>	Fracture <input type="checkbox"/>	Plug Back <input type="checkbox"/>	Work Over <input type="checkbox"/>																				
Alter Casing <input checked="" type="checkbox"/>	Initial Completion <input type="checkbox"/>	Pull Casing <input type="checkbox"/>	Other <input type="checkbox"/>																				
Artificial Lift <input type="checkbox"/>	Multi-Completion <input type="checkbox"/>	Recompletion <input type="checkbox"/>																					
Change Zone <input type="checkbox"/>	Perforate <input type="checkbox"/>	Sidetrack <input type="checkbox"/>																					
Deepen <input type="checkbox"/>	Perm Abandonment <input type="checkbox"/>	Temp Abandonment <input type="checkbox"/>																					
WELL AT SURFACE																							
12. Well Location At Surface (Surveyed) N06301E01597	13. Lease Number G 4090	14. Area Name WC	15. Block Number 294																				
35. Survey Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>	18. Water Depth (Surveyed) 43'	19. Elevation At KB (Surveyed) 101'	20. Rig Name ENSCO 55																				
		21. Rig Type JU																					
36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate)																							
<div style="border: 2px solid black; padding: 10px; transform: rotate(-15deg); display: inline-block;"> <p>Received MMS GOM OCS</p> <p>JAN 11 2000</p> <p>Public Information Unit</p> </div>																							
26. Contact Name ALLISON J. BROWN	27. Telephone Number 713.654.2651																						
28. Authorizing Official (Type Name) STEVE CONLEY	29. Title ENGINEERING SUPERVISOR, DRILLING																						
30. Authorizing Signature 	31. Date 001219																						
THIS SPACE FOR MMS USE ONLY <table style="width:100%;"> <tr> <td style="width:50%;">Approved By <u>(Orig. Sgd.) Larry D. Williamson</u></td> <td style="width:50%;">Title <u>Technical Supervisor</u></td> </tr> <tr> <td></td> <td>Date <u>12/26/00</u></td> </tr> </table>				Approved By <u>(Orig. Sgd.) Larry D. Williamson</u>	Title <u>Technical Supervisor</u>		Date <u>12/26/00</u>																
Approved By <u>(Orig. Sgd.) Larry D. Williamson</u>	Title <u>Technical Supervisor</u>																						
	Date <u>12/26/00</u>																						
<p>PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.</p>																							

SUNDRY NOTICES AND REPORTS ON WELL

1. Original <input checked="" type="checkbox"/> Correction <input type="checkbox"/>		2. API Well Number/Producing Interval Code 17-701-40320-00-X01		3. Well No. 003		11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP. 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604	
8. Field Name WILDCAT		9. Unit Number NA		10. MMS Operator Number 00560			
WELL AT TOTAL DEPTH							
4. Lease Number G 4090		5. Area Name WEST CAMERON		6. Block Number 294		7. OPD Number 2001 LA1A	
32. Type of Submittal Request Approval <input type="checkbox"/> Subsequent Report <input checked="" type="checkbox"/>		33. Proposed or Completed Work Acidize <input type="checkbox"/> Fracture <input type="checkbox"/> Plug Back <input type="checkbox"/> Work Over <input type="checkbox"/> Alter Casing <input checked="" type="checkbox"/> Initial Completion <input type="checkbox"/> Pull Casing <input type="checkbox"/> Recompletion <input type="checkbox"/> Artificial Lift <input type="checkbox"/> Multi-Completion <input type="checkbox"/> Sidetrack <input type="checkbox"/> Change Zone <input type="checkbox"/> Perforate <input type="checkbox"/> Temp Abandonment <input type="checkbox"/> Deepen <input type="checkbox"/> Perm Abandonment <input type="checkbox"/>					34. Well Status/Type Code COM
WELL AT SURFACE							
12. Well Location At Surface (Surveyed) N06301E01597			13. Lease Number G 4090	14. Area Name WC	15. Block Number 294	16. OPD Number LA1A	
35. Survey Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>		18. Water Depth (Surveyed) 43'	19. Elevation At KB (Surveyed) 101'	20. Rig Name ENSCO 55		21. Rig Type	
36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate)							
26. Contact Name ALLISON J. BROWN				27. Telephone Number 713.654.2651			
28. Authorizing Official (Type Name) STEVE CONLEY				29. Title ENGINEERING SUPERVISOR, DRILLING			
30. Authorizing Signature <i>Steve Conley</i>				31. Date 010131			
THIS SPACE FOR MMS USE ONLY							
Approved By Orig. Sgd.) Larry D. Williamson				Title Teddy J. Harrington District Supervisor Lake Charles District			
				Date 02/06/01			
<p>PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.</p>							

SUNDRY NOTICES AND REPORTS ON WELL

1. Original Correction <input checked="" type="checkbox"/>	2. API Well Number/Producing Interval Code 17-701-40320-00-S01	3. Well No. 003 ST00BP00	11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP. 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604	
8. Field Name WILDCAT	9. Unit Number NA	10. MMS Operator Number 00560		
WELL AT TOTAL DEPTH				
4. Lease Number G 4090	5. Area Name WEST CAMERON	6. Block Number 294	7. OPD Number LA1A	
32. Type of Submittal Request Approval <input type="checkbox"/> Subsequent Report <input checked="" type="checkbox"/>	33. Proposed or Completed Work Acidize <input type="checkbox"/> Fracture <input type="checkbox"/> Plug Back <input type="checkbox"/> Work Over <input type="checkbox"/> Alter Casing <input type="checkbox"/> Initial Completion <input checked="" type="checkbox"/> Pull Casing <input type="checkbox"/> Other <input type="checkbox"/> Artificial Lift <input type="checkbox"/> Multi-Completion <input type="checkbox"/> Recompletion <input type="checkbox"/> Change Zone <input type="checkbox"/> Perforate <input type="checkbox"/> Sidetrack <input type="checkbox"/> Deepen <input type="checkbox"/> Perm Abandonment <input type="checkbox"/> Temp Abandonment <input type="checkbox"/>			34. Well Status/ Type Code COM/GSI
WELL AT SURFACE				
12. Well Location At Surface (Surveyed) N06301E01597	13. Lease Number G 4090	14. Area Name WC	15. Block Number 294	16. OPD Number LA1A
35. Survey Base NAD 27 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/>	18. Water Depth (Surveyed) 43'	19. Elevation At KB (Surveyed) 101'	20. Rig Name ENSCO 55	21. Rig Type JU
36. Describe Proposed or Completed Operations (Attach prognosis or summary of completed work, as appropriate) <div style="text-align: center;"><p>Received MMS GOM OCS</p><p>MAR - 7 2001</p><p>Public Information Unit</p></div>				
26. Contact Name ALLISON J. BROWN		27. Telephone Number 713.654.2651		
28. Authorizing Official (Type Name) BRETT LIGGETT		29. Title SENIOR OPERATIONS ENGINEER		
30. Authorizing Signature 		31. Date 010226		
THIS SPACE FOR MMS USE ONLY				
Approved By (Orig. Sgd.) Larry D. Williamson		Title District Supervisor Lula Creek Area		
		Date 03/02/01		
PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.				

WELL SUMMARY REPORT

1. 1st Comp. Recompletion Abandonment Correction	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	2. API Well Number/Producing Interval Code 17-701-40320-00-S01	3. Well No. 003 ST00BP00	11. Operator Name and Address (Submitting Office) SENECA RESOURCES CORP. 1201 LOUISIANA, SUITE 400 HOUSTON, TEXAS 77002-5604
8. Field Name WILDCAT	9. Unit Number NA	10. MMS Operator Number 00560		

WELL AT TOTAL DEPTH

17. Well Location At Total Depth (Surveyed)	4. Lease Number G 4090	5. Area Name WC	6. Block Number 294	7. OPD Number LA1A
---	-------------------------------	------------------------	----------------------------	---------------------------

WELL AT PRODUCING ZONE

37. Well Location At The Producing Zone (Surveyed)	38. Lease Number G 4090	39. Area Name WC	40. Block Number 294	41. OPD Number LA1A
34. Well Status/Type Code	42. Date Well Suspended, Completed, or Abandoned 010131	43. Date of First Production	23. Spud Date 000915	
44. Date Sidetracked	45. Date TD Reached 010107	24. Total Depth (Surveyed) MD _____ TVD _____		

PERFORATED INTERVAL(S) THIS COMPLETION

46. Top (MD)	47. Bottom (MD)	48. Top (TVD)	49. Bottom (TVD)
50. Reservoir Name		51. Name(s) of Producing Formation(s) This Completion	

CASING RECORD

52. Hole Size	53. Casing Size	54. Casing Weight	55. Grade	56. Setting Depth (MD)	57. Cement Type	58. Quantity of Cement (Ft³)

Received MMS GOM OCS
MAR - 7 2001
Public Information Unit

TUBING RECORD

59. Hole Size	60. Tubing Size	61. Tubing Weight	62. Grade	63. Setting Depth (MD)	64. Packer Setting Depth (MD)

MMS

FORM MMS-125 (September 1999)
(Replaces all previous editions of Form MMS-125, which may not be used.)

Page 1 of 2

PUBLIC INFORMATION

WELL SUMMARY REPORT (continued)

LINER/SCREEN RECORD							
65. Hole Size	66. Liner Size	67. Liner WT.	68. Grade	69. Top (MD)	70. Bottom (MD)	71. Cement Type	72. Cement Quantity (Ft ³)

ACID, FRACTURE, CEMENT SQUEEZE, PLUGGING PROGRAM, ETC.			
DEPTH INTERVAL		75. Type Of Material	76. Material Quantity
73. Top (MD)	74. Bottom (MD)		

77. List of Electric and Other Logs Run, Directional Surveys, Velocity Surveys, and Core Analysis

78. SUMMARY OF POROUS ZONES: (Show all zones containing hydrocarbons; all cored intervals; and attach all drill stem and well potential tests.)

79. Formation	Top		Bottom		84. Description. Contents. Etc.
	80. MD	81. TVD	82. MD	83. TVD	

85. Geologic Markers	Top		85. Geologic Markers	Top	
	86. MD	87. TVD		86. MD	87. TVD

26. Contact Name <div style="text-align: center;">ALLISON J. BROWN</div>	27. Telephone Number <div style="text-align: center;">713.654.2651</div>
28. Authorizing Official (Type Name) <div style="text-align: center;">BRADLEY ELLIOTT</div>	29. Title <div style="text-align: center;">PETROLEUM ENGINEER</div>
30. Authorizing Signature <div style="text-align: center;"><i>Bradley Elliott</i></div>	31. Date <div style="text-align: center;">010226</div>

PAPERWORK REDUCTION ACT STATEMENT: The Paperwork Reduction Act of 1995 (44 U.S.C. 3501 et seq.) requires us to inform you that we collect this information to obtain knowledge of equipment and procedures to be used in drilling operations. MMS uses this information to evaluate and approve or disapprove the adequacy of the equipment and/or procedures to safely perform the proposed drilling operations. Responses are mandatory (43 U.S.C. 1334). Proprietary data are covered under 30 CFR 250.118. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB Control Number. Public reporting burden for this form is estimated to average 1.25 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to the Information Collection Clearance Officer, Mail Stop 4230, Minerals Management Service, 1849 C Street, NW, Washington, DC 20240.